

Please type a plus sign (+) inside this box → ☐

PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 3255
First Inventor Sarah Nicole Coty
Title HANDLE COVER PROMOTION SYSTEM AND METHOD
Express Mail Label No. EV 338372163 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 10]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 4]
5. Oath or Declaration [Total Pages]
 - a. ☒ Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
 - b. ☐ (for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Additional Postcard

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information:

Examiner _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

Name	Mark E. Brown				
	Chase Law Firm, L.C.				
Address	4400 College Boulevard, Suite 130				
City	Overland Park	State	Kansas	Zip Code	66211
Country	USA	Telephone	913-339-9666	Fax	913-339-6061

Name (Print/Type)	Mark E. Brown	Registration No. (Attorney/Agent)	30,361
Signature	Mark Brown		Date 8/5/03

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Certificate of Mailing by "Express Mail"
I certify that this paper or fee is being deposited with the U. S. Postal Service "Express Mail" service under 37 CFR 1.10 and is addressed to the Assistant Commissioner of Patents, Washington, D.C. 20231 on 8/5/03
Mark E. Brown, P.O. Reg. No. 30,361

22151 U.S. PTO
10/634502
08/05/03

FEE TRANSMITTAL for FY 2003 <i>Effective 01/01/2003. Patent fees are subject to annual revision.</i>		Complete if Known	
		Application Number	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	08/05/2003
		First Named Inventor	Sarah Nicole Coty
		Examiner Name	
TOTAL AMOUNT OF PAYMENT		Art Unit	
(\$) 375.00		Attorney Docket No.	3255

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																																	
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1425 Deposit Account Name: Chase & Yakimo		Large Entity Small Entity																																	
The Commissioner is authorized to: (check all that apply)																																			
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments																																			
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application																																			
<input checked="" type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																			
FEE CALCULATION																																			
1. BASIC FILING FEE																																			
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Description</th><th>Fee Paid</th></tr><tr><th>Code (\$)</th><th>Code (\$)</th><th></th><th></th></tr></thead><tbody><tr><td>1001 750</td><td>2001 375</td><td>Utility filing fee</td><td>375.00</td></tr><tr><td>1002 330</td><td>2002 165</td><td>Design filing fee</td><td></td></tr><tr><td>1003 520</td><td>2003 260</td><td>Plant filing fee</td><td></td></tr><tr><td>1004 750</td><td>2004 375</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005 160</td><td>2005 80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="3">SUBTOTAL (1)</td><td>(\$) 375.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Description	Fee Paid	Code (\$)	Code (\$)			1001 750	2001 375	Utility filing fee	375.00	1002 330	2002 165	Design filing fee		1003 520	2003 260	Plant filing fee		1004 750	2004 375	Reissue filing fee		1005 160	2005 80	Provisional filing fee		SUBTOTAL (1)			(\$) 375.00		
Large Entity	Small Entity	Fee Description	Fee Paid																																
Code (\$)	Code (\$)																																		
1001 750	2001 375	Utility filing fee	375.00																																
1002 330	2002 165	Design filing fee																																	
1003 520	2003 260	Plant filing fee																																	
1004 750	2004 375	Reissue filing fee																																	
1005 160	2005 80	Provisional filing fee																																	
SUBTOTAL (1)			(\$) 375.00																																
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																			
<table border="1"><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>14</td><td>-20** = 0</td><td>X</td><td></td></tr><tr><td>Independent Claims</td><td>3</td><td>-3** = 0</td><td>X</td></tr><tr><td>Multiple Dependent</td><td></td><td></td><td></td></tr></tbody></table>		Total Claims	Extra Claims	Fee from below	Fee Paid	14	-20** = 0	X		Independent Claims	3	-3** = 0	X	Multiple Dependent																					
Total Claims	Extra Claims	Fee from below	Fee Paid																																
14	-20** = 0	X																																	
Independent Claims	3	-3** = 0	X																																
Multiple Dependent																																			
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Description</th><th>Fee Paid</th></tr><tr><th>Code (\$)</th><th>Code (\$)</th><th></th><th></th></tr></thead><tbody><tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201 84</td><td>2201 42</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203 280</td><td>2203 140</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204 84</td><td>2204 42</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205 18</td><td>2205 9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="3">SUBTOTAL (2)</td><td>(\$) -0-</td></tr></tbody></table>		Large Entity	Small Entity	Fee Description	Fee Paid	Code (\$)	Code (\$)			1202 18	2202 9	Claims in excess of 20		1201 84	2201 42	Independent claims in excess of 3		1203 280	2203 140	Multiple dependent claim, if not paid		1204 84	2204 42	** Reissue independent claims over original patent		1205 18	2205 9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)			(\$) -0-		
Large Entity	Small Entity	Fee Description	Fee Paid																																
Code (\$)	Code (\$)																																		
1202 18	2202 9	Claims in excess of 20																																	
1201 84	2201 42	Independent claims in excess of 3																																	
1203 280	2203 140	Multiple dependent claim, if not paid																																	
1204 84	2204 42	** Reissue independent claims over original patent																																	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent																																	
SUBTOTAL (2)			(\$) -0-																																
**or number previously paid, if greater; For Reissues, see above																																			
		Other fee (specify)																																	
		*Reduced by Basic Filing Fee Paid																																	
		SUBTOTAL (3) (\$) -0-																																	

SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Mark E. Brown	Registration No. (Attorney/Agent)	30,361
Signature	Mark E. Brown	Telephone	913-339-9666
		Date	8/5/03

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.